

STATE OF VERMONT

HUMAN SERVICES BOARD

In re) Fair Hearing No. B-05/09-259
)
 Appeal of)

INTRODUCTION

The petitioner appeals a decision by the Office of Vermont Health Access (OVHA) denying reimbursement to petitioner for monies expended for emergency dental care and prescriptions while petitioner was out of state. The issue is whether the petitioner should be reimbursed for out-of-pocket medical expenses.

FINDINGS OF FACT

1. The petitioner was on a family vacation in Florida during early April 2009. The petitioner is a Medicaid recipient.

2. The petitioner experience severe pain on or about April 6, 2009 and sought dental care. Petitioner was seen twice by the dentist who determined at the second visit that petitioner had an infection. Antibiotics were prescribed. The petitioner's mother, J.Y., paid the costs on behalf of petitioner.

3. The petitioner sought reimbursement from OVHA. OVHA informed petitioner that the costs could not be reimbursed because neither provider was enrolled as a Vermont Medicaid provider.

4. Both petitioner and OVHA have attempted to convince the dentist and pharmacy to enroll as Vermont Medicaid providers. The dentist and pharmacy refuse to enroll.

ORDER

OVHA's decision is affirmed.

REASONS

Under the Medicaid regulations, providers who do not enroll in the Vermont Medicaid program are precluded from payment. M151. In addition, M152 provides that Medicaid payments cannot be made directly to a recipient. M152 states, in part, "[p]ayment cannot otherwise be made direct to a Medicaid recipient, even if he/she has already paid the provider for a covered service." The recipient's only recourse is to have the provider enroll in Vermont Medicaid and bill Vermont. Then, the provider reimburses the recipient.

Efforts have been made by both petitioner and OVHA to persuade the dentist and pharmacy to enroll in the Vermont Medicaid program, but these efforts have been unsuccessful.

The Board has recognized that although it may be harsh to require Medicaid recipients to bear the risk of paying for medical treatment when they travel, the limitation of Medicaid coverage to enrolled providers is within the regulations. Fair Hearing Nos. N-07/08-322 and M-08/08-365.

Accordingly, OVHA's decision is affirmed. 3 V.S.A. § 3091(d), Fair Hearing Rule No. 1000.4D.

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